

10/523110

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
Fee Record Sheet

Repln. Ref: 08/08/2005 DCOTTMAN 0012214500
DAH:140112 Name/Number:10523110
FC: 9204 \$100.00 CR

02/08/2005 MKAYPAGH 00000052 10523110

01 FC:1631 300.00 OP
02 FC:1632 500.00 OP
03 FC:1633 200.00 OP

08/08/2005 DCOTTMAN 00000003 10523110

01 FC:1642 400.00 OP

Adjustment date: 08/08/2005 DCOTTMAN
02/08/2005 MKAYPAGH 00000052 10523110
02 FC:1632 -500.00 OP

PTO-1556
(5/87)

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>8/4/05</u>		2 Serial/Patent # <u>10/523110</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/>	Filing			\$ 100.00
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
<i>Done</i>		7 TOTAL AMOUNT OF REFUND	\$ 100.00	
8 TO BE REFUNDED BY:				
<input checked="" type="checkbox"/>	Treasury Check			
	Credit Deposit A/C #:	<input type="text"/> - - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
9 <input type="text"/>				
10 REASON:				
<input checked="" type="checkbox"/>	Overpayment			
	Duplicate Payment			
	No Fee Due (Explanation):			
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Darrell Cottman</u>		TITLE: <u>Paralegal</u>		
SIGNATURE: <u>Darrell Cottman</u>		PHONE: <u>703-308-9140 x203</u>		
OFFICE: ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B